

# PROGRAMME UPDATE



International Federation of Red Cross and Red Crescent Societies  
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge  
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja  
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

## CENTRAL EUROPE: APPEAL REVISION

Appeal No. MAA66001  
15 December 2006

*The Federation's vision is to strive, through voluntary action, for a world of empowered communities, better able to address human suffering and crises with hope, respect for dignity and a concern for equity. Its mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 185 countries.*

### In Brief

**Programme Update no. 3 (Appeal Revision)**

**Initial Appeal target 2006-2007: CHF 4,082,136 (USD 3,426,250 or EUR 2,569,780)**

**Revised Appeal target: CHF 4,257,996 (USD 3,402,682 or EUR 2,663,738) <click here for the attached revised appeal budget>**

**Appeal budget for 2006: CHF 2,498,073**

**Appeal budget for 2007: CHF 1,759,923**

#### Related Emergency and Annual Appeals:

- **Central Europe Appeal 2006/2007. For details, please go to the website at, [http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual06/MAA66001.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual06/MAA66001.pdf)**
- **Programme Update no. 1. For details, please go to the website at, [http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual06/MAA6600101.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual06/MAA6600101.pdf)**
- **Programme Update no. 2. For details, please go to the website at, [http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual06/MAA6600102.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual06/MAA6600102.pdf)**
- **More information on Red Cross Red Crescent work in Europe can be found at, <http://www.ifrc.org/where/europe.asp>**

#### Programme summary:

The Federation Regional Delegation (RD) for Central Europe acts as a resource centre for National Societies (NSs) in areas defined by its proven competence and based on demand from NSs. In 2007, it will offer membership services in the areas of organisational development and capacity building, in participatory approach to community programming, health related activities, advocacy for new vulnerabilities and a regional approach to disaster response.

The initial annual appeal 2006-2007 for Central Europe indicated that the RD will provide technical and financial support to NSs in the following programme areas: Health and Care, Disaster Management, Organizational Development, Participatory Community Development, Humanitarian Values and Population Movement Programme in Croatia.

The RD revised the appeal to better align it with the Federation Global Agenda Goals to contribute to the Federation of the Future process. To do this it conducted a review exercise, in consultation with the relevant NSs, to re-evaluate the expected results and related activities in order to prioritize support. The revised appeal represents a better focusing of the Federation activities in the region on key areas which will further enhance the capacities of the NSs to deliver quality services for the most vulnerable.

The funding environment is also changing rapidly. The traditional funding from governmental sources through Red Cross Societies is diminishing as developmental and relief support for Europe moves further east or towards priorities in Africa. RC Societies in Central Europe are struggling to straddle the gap. While new opportunities are opening up (EU and other civil society / international development funds - World Bank, Council of Europe etc), the NSs have struggled to access them, due to a lack of capacity for filtering the calls for proposal (appropriate ones that fits into their prioritized activities in their long term strategy); language difficulties in terms of translating the calls in relevant local languages so the programme managers can proceed; and limited networking contacts to apply in consortium with other organizations for higher funding range projects.

This programme update provides detailed information on the programme and budget revision and includes programme logframes which explain the improved programme focus.

Secretariat Programmes in support of Regional Delegation Budapest (revised)	2007 Initial Total (CHF)	2007 Revised Total (CHF)
<b>Organisational development</b>	<b>274,845</b>	<b>313,743</b>
<b>Disaster management</b>	<b>423,171</b>	<b>426,996</b>
<b>Health and care</b>	<b>362,903</b>	<b>339,786</b>
<b>PCD/PM</b>	<b>355,000</b>	<b>437,668</b>
<b>Humanitarian values</b>	<b>118,984</b>	<b>119,036</b>
<b>Coordination &amp; Implementation</b>	<b>49,160</b>	<b>122,695</b>
<b>Total</b>	<b>1,584,063</b>	<b>1,759,923</b>

## Context

Humanitarian assistance continues to be needed as economic, social and health sector reforms, characteristic of the state-led processes in the countries of the region, have affected the most vulnerable groups in society. For some people, access to health and care networks has diminished following privatization and cost-cutting measures.

The situation for the Federation in the region has changed considerably over the last two years. At the beginning of 2005, the RD stopped providing support to the national Red Cross societies in the new EU countries of Estonia, Lithuania, Czech Republic, Hungary, Slovakia, Slovenia. Limited support has continued to Latvian and Polish RC, who had engaged in long-term change processes funded by the Federation's Capacity Building Fund. It was decided that the RD should continue to provide support and guidance to the key change agents in these NSs until the end of the programmes (as foreseen in the RD Strategy 2006-2009, this will be at the end of 2008). [<click here for the Central Europe strategy>](#) The NSs in the new EU countries turned to the RC/EU Brussels office for support in EU issues (funding, policy making/lobbying/advocacy, networking), and to the Europe Department in Geneva for membership services.

In the context of the Federation of the Future process, and the discussion on the essential and fundamental membership services, which should be available to all NSs from its Secretariat, the question of how best to deliver these services to the NSs in the region has been revived. During the leadership meeting in June 2006, bringing together NSs secretary generals and presidents, a clear message from the NSs was to look at alternative ways of providing access to membership services, rather than the current geopolitical coverage by regional delegations. This could be in the form of resource centres, open to a larger geographical area, crossing regions. However it should be available from within a region – not centrally from Geneva. The RD is already moving in this direction, having invited Latvian, Polish and Hungarian RC to attend the leadership meeting – a move, which was highly appreciated. A request was made by those NSs to extend this invitation to other new EU NSs for future meetings.

NSs in the region have been adjusting to changes in the political system over the past decade and a half, from a centralized one where they tended to be part of the state system, often as implementing agencies of the Ministry of Health with full funding, to a system where they have become more independent, but as a consequence often lost financial support from the authorities. This has left them struggling with heavy and expensive structures and traditional programmes which are difficult to fund while new important needs are emerging, requiring from them new skills and approaches both regarding financing and managing their activities and their relations with the authorities. The NSs of the Balkans face the additional difficulty of reconciling their structures in a post conflict situation

During the meeting for NS leaders participants indicated their priorities for the coming years:

- To focus on improving the quality of the programmes and organisations as a basis to **scale up** quantity and outreach
- To improve the general legal framework of RC law including increasing funding opportunities from regular sources (state, municipality) into this framework.
- To improve skills and knowledge of staff / volunteers in technical programmes
- To move towards greater financial stability through improved, finance management, diversification of funding sources, local/national fundraising
- To improve monitoring, evaluation and accountability of NS
- To improve internal communication – sharing good practice and best use of resources available within one NS

The above mentioned priorities all lead to better performance, increased capacity for providing better services and better image of the NS's which, if contributed enough in fulfilling them, would contribute to meeting better the Characteristics of a Well Functioning National Society.

In general, the leadership is satisfied with the services being provided by the RD. However, a key area of concern is ensuring that in spite of any geo-political changes (more states accessing EU, changing funding situation in Europe), that they will still have access to basic membership services of the Federation, provided as close to home as possible.

For additional information on the achievements of the RD in Budapest Regional programmes in 2006, please see programme updates 1 and 2 [<click here for programme updates 1 and 2>](#)

### ***RD Goals for 2007 and 2008***

The area of support included in the revised appeal have been evaluated and prioritized based on the NS's priorities outlined above and the RD Strategy 2006-2009. RD goals for 2007-8 are also better aligned with the Federation ***Global Agenda Goals***, which contribute to achieving the Millennium Development Goals. Through support from the Federation Regional Delegation (and other RC/RC Movement Partners) NS's in the region are expected by the end of 2008 to have:

<b>Expected Results</b>	<b>Global Agenda</b>
<ul style="list-style-type: none"> <li>• become well functioning NSs working effectively to improve the lives of vulnerable people (organisational development programme)</li> </ul>	Goal 3 + 4
<ul style="list-style-type: none"> <li>• contributed in reducing intolerance, discrimination and social exclusion and promote respect for diversity and human dignity of vulnerable communities and individuals in Central Europe (humanitarian values programme)</li> </ul>	Goal 4
<ul style="list-style-type: none"> <li>• strengthened role of the NSs in CE region in Health and Care programme to reduce the number of deaths, illness and impact from diseases and public health in emergencies as viable partners of their governments. (health and care programme)</li> </ul>	Goal 2

<ul style="list-style-type: none"> <li>local vulnerable communities empowered and capable to cope with the challenges of vulnerability and its root causes through participation and community action (participatory development programme)</li> </ul>	Goal 3 + 4
<ul style="list-style-type: none"> <li>increased efficient and effective response of NSs in the region to natural or man-made disasters (disaster management programme)</li> </ul>	Goal 1

With regard to the programme support provided by the RD in Budapest, it is important to emphasize that the RD by policy provides support only to sustainable programmes. In order to be more efficient in doing that, long-term funding commitment by donor NSs and other partners is needed. In its efforts to support the local Red Cross organizations, the Federation has already ensured the full ownership and implementation responsibility for all programmes by the NSs in the region. The continued support in capacity development will further strengthen the organisational and operational structures.

NSs currently supporting the Federation RD through its regional appeal (in 2006-07) are:

Program	Health and Care	Disaster Management	Organisational Development	PCD	Humanitarian Values	Coordination and Implementation
<b>Partner National Society</b>	*Norwegian RC *British RC *Finnish RC	*Norwegian RC *Finnish RC *Swedish RC	*Norwegian RC *Capacity Building Fund *Swedish RC	*Norwegian RC *British RC *Finnish RC	*British RC *Swedish RC	*Finnish RC

## Organizational Development

As reflected in the *Regional Strategy for Central Europe 2006-9*, it comes as no surprise that the priorities expressed by the NSs of the larger Central Europe region (including the new EU NSs) have been focused on organizational issues: governance and management, statutes, and finance and resource development; as well as to promote knowledge sharing, networking and partnerships in technical programme areas. RD remains committed to providing assistance to meet at least some of the above mentioned priorities through its Organizational Development Programme during 2007.

Most of the NSs in the region have improved planning, reporting and have finance management systems in place, and are now conducting an external audit as a regular practice each year. However, there is still a need to build on these positive developments to meet increasing demands for transparency and accountability. Even though there are many commonalities throughout the region, the situation still varies from NS to NS. NSs are at different stages in their development: some still need strong support and others are becoming more self-sufficient. Approaches to the development work in each NS should be adapted and tailored made.

There will be a slight change in the priorities from the previously planned activities. The major change that will affect the work is related to the official end of Capacity Building Fund support provided to the Polish and Latvian Red Cross. Nevertheless, the question remains- from where this intensified capacity building support will be provided in the future. Obviously, these two NSs (and some others) will require in the future Organizational Development/capacity building support. These changes will affect work in the RD only from the project management/administration/finance side. Contacts and cooperation with these two NSs will continue to be in place since the working relationship, openness and trust has been established and official end of financial support will not necessarily have any impact on the future cooperation.

Knowledge and experiences, both negative and positive can be utilized between different NSs. Due to the very extensive and long-term change process that the Polish and Latvian Red Cross went through, staff and volunteers, to certain extents can be used in the future in order to support some other NSs during their change process.

Planned activities in Macedonia and Albania have changed since these two NSs decided to modify slightly the scope of capacity building work. The Norwegian Red Cross has supported capacity building work in these two NSs for many years. The Macedonian Red Cross invested a lot of effort by working together with the RD Budapest and Norwegian Red Cross and inputs from external partners were complementary and based on the NS needs, their Strategy and priorities. In the case of the Albanian Red Cross due to the slow implementation this year and late decision of the Ministry of Foreign Affairs of Norwegian Government and Norwegian Red Cross majority of this year planned activities will be implemented next year.

Funding for the Organizational Development / capacity building activities within the region is still available from different sources. However, in the light of emerging needs in other parts of the world, change in priority focus for some governments/institutions and a certain level of donor fatigue, it will be crucial to keep the same level of funding at least for the next two years to ensure consolidation of the work so far. Other available sources of funding for capacity building efforts are the Federation's Capacity Building Fund and, to a certain extent, the Empress Shoken Fund. There are some changes expected to the functioning of the Capacity Building Fund, following the review in 2005/6. Together with the Federation's newly adopted Common approach to NS Development, we cannot be sure to what extent NSs in the region will be eligible to apply for funding for these type of activities. What is certain is that membership services in the OD area will need to be provided to the NS's in the region continuously.

OD and capacity building in the future will be focused on:

- Organizational assessment as a precondition for entering to a change process
- Organizational restructuring – advice, consultancy
- Strategic planning, operational planning, image building and finance management
- Training programmes for NS governing board and branch governance
- Human Resource recruitment, management and development for staff and volunteers to ensure skilled staff in the right positions – support to these NS that already have this objective in their development or strategic plans
- Fundraising strategies and developing new funding sources
- Better planning, reporting and external audit as transparency tool
- Skills development in project planning, reporting and fundraising
- Assessment methodologies and expertise, including participatory approaches such as PCD
- Establishing communication with the government
- Preparing for EU accession – capacity building, partnerships, networking and funding opportunities, involving regional NS in EU funded programmes

### ***Overall Goal***

Well functioning NSs working efficiently and effectively to improve lives of vulnerable people.

### ***Programme Objective***

Stronger and responsive NS's with good image, finance management, planning, sustainable programmes, appropriate structure and people [<click here for OD project logframe>](#)

### ***Expected Results:***

1. NS's governance and management have improved skills to lead and contribute to achieve the Characteristics of Well functioning National Society standards.
2. NS's have a strategy and income plan leading to financial sustainability of programmes.
3. NSs have an appropriate human resource structure, policy and management both for staff and volunteers.
4. NSs in the region are sharing on the regular basis knowledge, experience and human resources as tools to improve their own work.

## Disaster Management

The impact of natural disasters in the region is growing on an annual basis. Flooding, landslides, heavy snow falls and earthquakes remain the main risks. In many countries, government response remains weak and inconsistent, disaster preparedness planning at national level is under developed or still not developed in some countries. In others, the plan on paper is not translated into action in real life situations. Cross border agreements are either not developed or not respected and implemented. With key flooding along the length of the main rivers in Central Europe, and their subsidiaries, it is essential that inter governmental agreements for flood control and response are in place to limit the scale and impact of floods along the north/south axis. Other coordination mechanisms are also developing – particularly under the umbrella of Stability Pact and Disaster Preparedness and Prevention Initiative (DPPI). The Red Cross is tapping into funding from these bodies – but at the preparedness and disaster response training level.

Having a Disaster Management (DM) department with at least one programme coordinator in charge of DM in every NS, development of NS Disaster Preparedness plans as well as having a functioning DM network can be seen as a very big achievement in the region. All NS's have trained Regional Disaster Response Team (RDRT) members. One part of regional disaster management planning since 2001 has been the setting up of the RDRT. Following a first basic training in 2002, three more basic training courses have been held (2003, 2005 and 2006) as well as three refresher courses. One of the contributions of NSs to RDRT is by releasing staff/volunteers for short term missions in the region. The focus now is on how to ensure that these national capacities can also be mobilized effectively to respond regionally. Today there are over 70 people on the regional roster, forming the backbone of the region's emergency response capacity. Over 15 of those already trained RDRT members come from the governmental sector supported by the Stability Pact DPPI. There are regular bi-annual meetings of NS disaster management coordinators in the region, who support each other strongly. RDRT basic training and refresher courses are held on an annual basis.

The regional disaster response capacity was severely tested. In 2006, four RDRT members from Central Europe were deployed to Pakistan for the earthquake and 12 went to the Romania floods mission. The teams worked closely with the affected NSs on needs assessment, providing technical support and advice as well as establishing contacts and coordination with local authorities and relevant organizations.

One of the priorities for the RD is to promote community values of safety and responsibility so people know what to do in an emergency. This demands preparation, but also knowing what capacity exists that can build confidence and save lives. Vulnerability and Capacity Assessment (VCA) is one of the tools for taking a community based approach within DM, and helps local communities look at what emergencies they could face and challenges accepted perceptions of vulnerability. Building on commonalities between VCA and PCD methodologies, joint training for trainers will be supported in 2007. Psychological support in DM will be a key element included in all trainings to be held in 2007, at coordination meetings, RDRT training and joint PCD/VCA training.

To continue building the capacities of NSs in Disaster Response and retain the roster of well trained and prepared staff and volunteers who can respond at any time in the most proper way, long term sources of funding should be found in the region and beyond. The funding situation in Europe is evolving and traditional sources are changing. Money from back donor governments for EU countries or accession states has stopped. Funds can only be accessed directly from EU institutions: ECHO or Europe Aid, or via Solidarity funds held by the respective governments.

In order to ensure that the network will be self-sustaining once outside funding through RD has finished, capacity building will focus on:

- Ensuring quality contingency planning is regularly updated at national level and feeds into / takes into account neighbouring / regional NSs contingency planning.
- Increasing capacity for cross border deployment of stocks, equipment and personnel based on pre planning/agreements between NS and based on contingency plans
- Focusing on national disaster response mechanisms including national disaster response teams – NDRT, (or regional or local alternatives) and ensuring full range of profiles are available both nationally and to feed into regional RDRT mechanism (including health in disasters, communications/media, reporting, administration and finances) and that key skills are covered in training (including coordination, needs assessment)
- Increasing the opportunities for deployment regionally – specifically for those members outside the current region covered by the regional delegation i.e. the new EU NSs.

- Support NSs in positioning with government and with EU through provision of good examples in disaster response to access funding and good cooperation models for disaster response.
- Ensuring standards are available and disseminated in DM training, DP planning, strategic planning and policy frameworks.

### **Overall Goal**

The efficiency and effectiveness of NSs in the region in their response to natural or man-made disasters is increased.

### **Programme objective:**

Disaster response capacity of the NSs in the region is strengthened through the development of disaster preparedness plans and a regional disaster management strategy, including a contingency plan and regional cooperation. [<click here for DM project logframe>](#)

### **Expected Results:**

1. By the end of 2007, all NSs in the region have updated their disaster preparedness plans and contingency plans.
2. By the end of 2007, the regional disaster management / contingency plan – based on regional threats, needs, opportunities, and resources shown in the computerised regional database, outlining the specific roles and responsibilities of NSs – is updated. In addition, disaster response mechanisms are continuously updated at the regional delegation enabling it to be ready for prompt action.
3. Close cooperation with the regional health and care, PCD, organisational development programmes and ICRC continues to improve the quality of disaster management planning within the region and NSs by the end of 2007
4. The Regional Delegation based on a community-based approach will have established a network of trainers in the region to support the use of VCA and PCD methodologies in the NS's throughout 2007
5. The regional disaster management programme is throughout 2007 supporting the NS's in developing the communities' capacity to mitigate the impact of natural and man-made disasters when they occur
6. By the end of 2007, Regional Disaster Response Team is consolidated, with clear roles and responsibilities, equipped and prepared to respond efficiently in case of disaster. One basic RDRT training and Simulation for all Regional disaster response team (RDRT) members have been organised in 2007. Basic equipment for RDRT has been purchased.
7. The regional disaster management programme is throughout 2007 providing continued support to NSs in their work with the Stability Pact DPPI.
8. Throughout 2007 the regional disaster management programme will support the NS's in establishing contacts with relevant programmes within the EU.

## **Health and Care**

Health related issues remain high on the humanitarian agenda in Central Europe. Health sector reforms have had an impact on the most vulnerable groups in society, whose access to health and care networks is diminishing as a result of privatization and cost-cutting measures. New vulnerabilities are emerging in the region including old and new health problems such as tuberculosis, HIV/AIDS and drug and other substance abuse especially among young people. Avian Influenza is the latest challenge. Without investment in prevention at this stage, these new health problems could easily develop into larger scale disasters. The health implications of disasters need to be captured in disaster response contingency planning as well as emergency health response. Some countries, due to their status in the EU accession process, could face difficulties as previous sources of funding are no longer accessible.

The Regional Delegation Health and Care (H&C) programme has been supporting NSs in Central Europe since 2001, contributing to capacity building and promotion of health and well being of vulnerable individuals and communities. Against an unstable socio-economic environment and with the appearance of new diseases, achievements have to be consolidated in order to create an adequate RC response having strategic plan that is defined together with major stakeholders in the respective countries. During the past years the NSs have shown their competence and commitment, even with limited financial and human resources, in prioritizing and dealing

with H&C issues as key partners for governments in delivering on the Millennium Development Goals. The RD will continue providing assistance to the NSs so they can further improve H&C situation among the population through its revised appeal, aligned with *Global Agenda Goal 2: "to reduce the number of deaths, illness and impact from diseases and public health in emergencies."* There can not be unique support provided to every NS in the region because of the varying situations of state provision of H&C services in each country and the different challenges facing vulnerable groups in the communities. For example some NSs will continue with home care support to elderly and socially most vulnerable people, while others will continue implementing child survival projects and education for females in reproductive health.

Partnership building, community involvement and volunteer management are still limited and emphasis must be put on supporting NSs with clear H&C goals and priorities. In light of the new cooperation agreement between the Federation and WHO, the RD will support and assist NSs in approved collaboration.

The last few years have seen a dramatic cut in government funding opportunities for RC programming in the Central Europe region. It seems that there is a belief that EU funding can cover all, as well as an underestimation of the complexity and severity of the health situation on the part of back donors. Although new sources of funding direct from the EU to accession country governments are opening up, governments have not yet created all the mechanisms and systems necessary to make this happen. With the present support of only one major donor- Norwegian Red Cross- the H&C programme activities risk being limited to only HIV/AIDS and TB activities. The Finnish RC gave funding for 2006 for blood and health in emergencies. However, with funding decisions made on a yearly basis, it is difficult to encourage longer term strategic planning in H&C and to support longer term development projects. Long-term support from donors is, however, crucial for H&C programme.

#### *HIV/AIDS*

The incidence of HIV/AIDS and TB is growing in this region, so the RD will continue to contribute to its prevention. Some of the NSs are working as a partner of their governments in implementing the Global Fund for HIV/AIDS, TB and Malaria (GFATM). In the area of HIV/AIDS, projects are targeting prevention of sexually risky behavior among different target groups and the RD will continue providing assistance to the NS in identifying the most vulnerable groups (youth, intravenous drug users (IDU), commercial sex workers (CSW) and victims of trafficking through community-based approach and more effective involvement of people living with HIV/AIDS (PLHIV). RD is planning awareness and advocacy campaigns with all NSs to fight stigma and discrimination for PLHIV. One of the important events to be organized in 2007, as every year, is World Aids Day and the RD will work with NSs to identify suitable and sustainable projects to mark this event but also to ensure that anti-stigma and discrimination issues receive attention through the whole year and not just in December.

#### *Harm Reduction*

The RD will continue to support NSs in implementing HIV/AIDS activities related to Harm Reduction (HR) programme in coordination with the Federation Secretariat and the Italian RC in order to strengthen the capacity of the NS's in the region.

#### *TB*

TB has growing incidence in Central Europe region and Federation has to promote bigger and better involvement of HIV and TB affected persons in campaigns with the goal of reducing stigma and discrimination present in the communities. NS's have to be proactive in presenting their plan of activities and have to take an active part in TB control. The Federation Secretariat together with WHO and RD will provide technical support in preparing and implementing the Plan of Action for TB projects according to the Federation guidelines. Eligible NS's will work as a partner of the Government on Global Fund to fight Aids, Tuberculosis and Malaria (GFATM) and have to lobby strongly for inclusion in TB projects on behalf of vulnerable groups and to approach their respective Country Coordination Mechanisms (CCP) as an important funding source. In the area of TB control NS's are also engaged in Direct Observe Treatment Strategy (DOTS). Therefore, the RD will continue to assist NS's, through their TB projects to raise awareness among vulnerable groups and focusing on patient treatment compliance providing incentives. NS's have also developed the community based approach supporting patients and family members through home care or hospital visits. Due to very high incidents of Multi Drug Resistance (MDR) and TB in some countries, NS's should implement strong campaigns for TB affected persons to improve their treatment awareness.

*Public Health in Emergencies (PHE)*

The RD will continue to promote an integrated approach to health and DM activities focusing on reducing community vulnerability to the effects on public health in emergencies (PHE) and increasing involvement of health staff and volunteers in the PHE training.

*Voluntary non-remunerated blood donor's recruitment (VNRBDR)*

In the future, there will be more emphasis on strengthening NS's capacity to develop their national Blood Donation programme in partnership with the relevant ministries and blood transfusion centre. Based on a request from NSs, there will be joint meetings organized at the regional level to promote collaboration and experience / information sharing.

*Psychological Support (PSP)*

Psychological Support programme should, and will, be more integrated with other health activities. Experience will be shared with other NSs to encourage development of similar activities. Participation at the annual meeting of the European Network of Psychological Support (ENPS) to collect good practices is very much recommended. The NSs need to be engaged in new response methods like anti stigma and discrimination of PLHIV or TB. More attention should be oriented to practical tools and support to the professional staff.

*First Aid (FA)/Community Based FA (CBFA)-Global Road Safety Partnership (GRSP)*

The NSs in the region have traditionally been involved in First Aid (FA) as the only agencies implementing FA for drivers as a local income generating activity. FA is an entry point to be connected with other H&C activities, like DM, PSP or HIV/AIDS prevention. Next year, NS's in the region will organize National FA competition in order for the winning teams to take part in the FA Competition Europe (FACE). Standardization of the training curriculum has to provide an opportunity to all NS's following the European guidelines. The RD will assist NS's actions marking the World First Aid Day 2007 on the second Saturday of September to organize public events and to raise awareness about the importance of the FA. CBFA is a good base to link with other activities identified in the communities and through the voluntary network. The Global Road Safety Partnership (GRSP) mission is to facilitate road safety initiatives with special attention on mapping the current situation

RD Health and Care Programme in the future will focus its work on:

- assisting NSs access long term funding for key HIV/AIDS and TB activities in prevention and care from sources outside the RC Movement including GFATM
- increasing expertise in harm reduction activities by using peer to peer opportunities for coaching, training and study visits
- strengthening advocacy component and promotion of humanitarian values elements in HIV/AIDS and TB programming – working with social exclusion and stigma issues
- strengthening the capacity of NSs in health in emergencies when responding to national disasters and to promote an integrated approach to health and disaster management
- strengthening community capacity to prevent and/or reduce the impact of public health emergencies
- strengthening national programmes on voluntary non remunerated blood donor's and safe blood supply, building partnerships with governmental institutions, but also with other community-based organizations active in this field
- encouraging community based approaches to developing H&C programmes and including psychological support components where appropriate.

**Overall Goal**

NSs in CE region strengthen the role of Health and Care programmes to reduce the number of deaths, illness and impact from diseases and public health in emergencies as viable partners of their governments.

**Objective**

The capacity of the NSs Health and Care programme to identify and respond to the needs in the region through the promotion of knowledge sharing and exchange of best practices [<click here for Health and Care project logframe>](#)

### **Expected Results**

1. NSs have increased skills and knowledge to work on prevention of HIV/AIDS among vulnerable groups.
2. NSs have contributed to TB control and prevention in the relevant countries through promotion and support of DOTS.
3. The capacity of NS's has been increased to reduce the vulnerability of communities to public health in emergencies and disasters
4. NSs are supported in ensuring safe blood through VNRBDR and increased cooperation on safety of blood supplies
5. NSs consider PSP as an integrated part of their H&C programmes
6. NSs has increased capacity for strategic planning and partnerships development to contribute to the H&C control in the community
7. NSs have capacity to standardize FA training courses and implementing CBFA and Road Safety

### **Participatory Community Development**

The Participatory Community Development (PCD) programme focuses on empowering local vulnerable communities and raising their capacities to identify and address existing vulnerabilities through participation and community action. It is based on Participatory Rapid Appraisal (PRA) and other participatory approaches and is being used by the Red Cross branches in Central Europe as a tool to empower communities identify common problems and search for solutions, mainly in the social and health sector, together with the local stakeholders. The PCD programme is an example of the Red Cross response to global challenges such as extreme poverty, social exclusion and discrimination of marginalized groups on the local community level, promoting equal participation of all community members in their development. The programme objectives regarding the marginalized groups are aligned with the *Global Agenda Goal 4 (Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity)* through participatory community action corresponding to *Goal 3 (Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability)*.

Since its launch in 2000, NSs involved in the PCD programme have been from Hungary, Macedonia, Romania, Bulgaria, Serbia, Montenegro, Croatia, and Bosnia Herzegovina. Albanian and Polish RC have also participated in one programme cycle. The round of the PCD programme that started in 2005 has lead to a *scaling up* within new countries with the involvement of two new NSs in the PCD process. One of the NSs is scaling up the PCD programme from branch to national level. In 2005 and 2006 the PCD approach was successfully tested with new types of marginalized vulnerable communities and target groups: migrants and children in social institutions.

The gathered experience of the PCD practitioners in CE countries has been utilized inside and outside the region. With the support of the RD, the PCD roster provided direct consultancy support for a pilot PCD project implemented in Asia, as well as for reviewing the PCD programmes finalized by two NSs. A PCD meeting organized in March 2006 in Budapest collected both experiences of PCD programmes in CE and some countries in the Caucasus and Central Asia as well as the experience of some donor NSs.

The issues related to the vulnerable and marginalized Roma in Central Europe have been further explored and a number of NSs both from West and Central Europe, supported by the RD and the Country Delegation in Belgrade as well as Secretariat in Geneva have produced a draft Point of View paper, named "Social inclusion of vulnerable Roma and other marginalized groups" and a draft of Red Cross "Guidelines on vulnerable Roma and other marginalized groups in Europe". Both documents will be used as a tool for raising the awareness of the Red Cross Movement on the Roma issues and involving more NSs in the activities related to the support for the Roma inclusion, reducing the vulnerability and discrimination towards this particularly vulnerable target group. The Secretariat in Geneva has stated its strong support to the initiative and will seek opportunities for inclusion of the Roma issues in its international events.

Despite the importance of this programme for the region, there is a major constraint that has existed for several years- the limitations of the operational timeframe. As a very specific process, depending to a very high extent on the readiness and willingness of communities to change, as well as of the capacities of all stakeholders to participate in the process: community, Red Cross, local authorities, other partners, the realistic timeframes for deep change process normally takes much longer.

The effects of the time limitations that have been seen until now are:

- Limited time for implementation in the field.
- Limited time to work with vulnerable communities and achieve a sustainable change of behavior, leading to smaller impact.
- Limited time to search more local resources prior to using donor's funding, based on the fear that after the termination of the operational timeframe funding will not be available.

A second constraint that appeared in the last period is related to the fact that the PCD programme has scaled up to new countries. At the same time, experienced PCD coordinators have left their positions in three other countries. The implementation of PCD itself is gradually building capacities, but mainly at branch level, while at national level more skills and expertise is needed in community development processes, training and facilitation skills as well as skills in monitoring of the progress at branch level. As PCD is not part of a traditional core activity of the Red Cross/Red Crescent, PCD Coordinators at HQ level are normally sharing several responsibilities. That affects the process of monitoring, as well as the needs of the RC branches to be supported by the HQ, when stronger advocacy is needed and when facilitation skills are insufficient at the branch level.

The capacity building, in order to ensure sustainability in the future, will focus on the following:

- Bring more focus on the vulnerabilities in the region and promote the use of the PCD approach as an effective community based tool for dealing with socially important issues such as intolerance, discrimination and social exclusion of various target groups such as Roma, migrants, victims of trafficking, people with HIV/AIDS, elderly and as a Red Cross/Red Crescent tool to promote the respect for diversity and human dignity. Such focused approach would bring more opportunities in finding funding sources for the future.
- Support in increased NSs participation in the process of planning of the Regional PCD programme, and promoting the bottom-up approach (local-national-regional), as well as setting standards and criteria for quality implementation throughout those levels. The longer term participatory planning done locally would enable the RC field workers to cope with the issue of normally short donor timeframes.
- Support the process of building the capacities of the NSs in PCD through training, coaching, consultancy and joint action, by utilizing the resources and knowledge available on different levels of the NSs and deployment of members of the Regional PCD roster in support to NS where need exists.
- Enlarge and strengthen the Regional PCD practitioner's roster by involving experienced people from branch level and also promote a better gender balance in the roster.
- Promote the integration of the PCD approaches in traditional Red Cross programmes and activities such as OD, DM and Health.
- Revise the PCD toolkit, published on FedNet, and link to relevant materials used by other development organizations.
- Work to improve the contacts, networks and partnerships with other developmental organizations, bringing in valuable experience.
- Continue the process of building guidelines for working with Roma and other marginalized groups in Europe.
- Search for resources to ensure the diversification of funding available for the regional PCD programme and support and promote the initiatives of the NSs in applying for funding from other sources with partnerships and joint applications between EU and non-EU NSs.
- Promote the PCD approaches and methodologies using all available channels in the region.

### ***Overall Goal***

Local vulnerable communities are empowered and have capacity to cope with the challenges of vulnerability and its root causes through participation and community action.

### ***Objective***

NSs in the region are working with the local vulnerable communities in participatory way aiming at reducing vulnerability and strengthening the process of social integration of marginalised groups. [<click here for PCD project logframe>](#)

### **Expected Results**

1. More vulnerable and marginalized people benefit through active participation in the PCD programme in and outside the CE region.
2. Increased capacity of the NSs in the region to progress towards Goal No. 4 of the Global Agenda (*Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity*) through targeting Goal No. 3 (*Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability*)
3. Increased level of participation of the target groups in the programs, activities and structures of the NSs in the regions.
4. The concepts and the methodologies, related to Participatory Community Development are further developed to enhance programme development.
5. Improved networking with the PNSs

### **Population Movement**

Poor social and economic conditions and lack of job opportunities in return areas of Croatia remain powerful obstacles to sustainable return of large numbers of refugees still in Serbia and Montenegro and Bosnia Herzegovina (BiH). Once they return, urgent assistance is needed, since most of them return to rural areas that are economically depressed and they face considerable difficulties in the economic and social reintegration. UNHCR estimates that during the 2006, some 12,000 refugees may return to Croatia from Serbia and Montenegro and 3,000 from BiH.

The Croatian Red Cross (Croatian RC) provides assistance to beneficiaries in return areas obtain their administrative and statutory rights during the process of reintegration, through its network of local branches, outreach mobile teams and trained volunteers, experienced in working with the local communities affected by war. This community-based project, as one component of the extensive Croatian RC programme for providing assistance to returnees, aims to support returnees attain basic decent life conditions and begin a new life with a sense of dignity. It works with multiethnic communities to reduce the vulnerability and strengthen the process of social integration of returnees and other vulnerable persons. The objective is that the multiethnic local communities in return-areas have increased their capacities to integrate the most vulnerable returnees - individuals and families - and to ensure basic conditions for their sustainable return.

In order to assist the most vulnerable returnees during 2007, procurement and distribution of food and hygiene parcels, stoves and beds with bed linen is foreseen. Food and hygiene parcels were added to the relief items to be distributed since the mobile teams noticed that upon return, some families have no resources to procure the basic necessities indispensable for starting life back home. (Food and hygiene parcels contain: sugar, salt, wheat flour, rice, oil, soup, cheese, marmalade, fish tin, yeast, spaghetti, corn flour, detergent, soap, toilet paper, tooth paste, shampoo and candles). Through this assistance, returnees' living conditions will significantly improve in an area known for harsh winters and isolated remote villages.

Croatian RC considers small community mobilisation projects, interethnic social activities and distribution of basic relief items to the most vulnerable returnee families, as complementary parts of this programme, tailored to address specific needs of the returnees and other vulnerable persons in the return communities.

There is still a need to seek support from the international community in the process since the return areas in Croatia are not yet able to sustain return/reintegration programmes themselves and the government's support is not sufficient to fulfil the requirements for sustainable return.

The Croatian RC in the future will be focused on the following:

- Further develop interethnic community activities in the RC branches information points/community rooms in a participatory, community- based manner, tailored towards specific target groups such as children, women, elderly and unemployed.
- Implement small community-mobilization projects for the benefit of returnees following participatory needs assessment coordinated by the RC Committees.
- Further develop a referral system with grass-root information from volunteers and mobile teams in the field

- Purchase and distribute basic household items (100 stoves and 150 beds with bed-linen, 150 food and hygiene parcels) to vulnerable returnees identified by the CRC mobile teams in return areas of Lika, Dalmatia, Banovina and Kordun
- Include the Red Cross mobile teams and experienced volunteers in responding to the problems of potential returnees
- Facilitate social inclusion of returnees and other vulnerable persons within the local community through social activities and community projects.
- Inter-ethnic social activities are taking place within the RC branches, promoting RC principles and reconciliation and thus facilitating social inclusion of returnees and other vulnerable persons.

### **Overall Goal**

Croatian Red Cross is effectively working with the multiethnic communities in the areas of return in Croatia in order to reduce vulnerability and strengthen the process of social integration of returnees and other vulnerable persons.

### **Objective**

Multiethnic local communities within the return areas in Croatia have increased their capacities to integrate the most vulnerable returnee families and to ensure basic conditions for sustainable return. [<click here for PM project logframe>](#)

### **Expected Results**

1. Returnees and other vulnerable persons benefit from the small community mobilisation projects tailored to the needs of the community through participatory engagement in five local Red Cross branches in return area: Slunj, Otocac, Gracac, Ogulin and Korenica
2. Vulnerable returnees living in return areas are provided with basic household items.
3. Inter-ethnic social activities are taking place within the five local Red Cross branches, promoting RC Principles and reconciliation and thus facilitating social inclusion of returnees and other vulnerable persons.
4. Referral system with the grassroots information volunteers and mobile teams in five local RC branches further developed.

## **Humanitarian Values**

The promotion of humanitarian values has been reintroduced by the RD as a separate programme section in 2006 after a period of being integrated into other programme areas. RD, even though trying to address this area of high importance in a special way, is facing major difficulties in terms of funding. Although there will be no additional permanent staff resources to support this programme, all RD programme coordinators will be supporting their NS counterparts to include Promoting Humanitarian Values (PHV) components in all technical training, and ensuring access to the latest tools and presentations.

The RD will continue to support NS in implementing anti-stigma and discrimination campaigns to support those living with HIV/AIDS and TB. These activities fall under the budget of the regional health and care programme. In the past the RD has been promoting debate on the RC response in the region to human trafficking, albeit at a limited level. One issue of *The Bridge* magazine was devoted to this subject. As an extension of this, in 2007, the RD will support NS to position themselves in response to human trafficking, cooperating, and coordinating this work, with the Danish RC-based facilitator of the European Red Cross/Red Crescent Cooperation in Response to Human Trafficking. The countries of Central Europe find themselves at the heart of the problem. Although statistics show a constant increase in the number of women trafficked into the EU coming from Central and Eastern Europe, the countries of the region are not just countries of origin but also transit and destination. Some NSs in the region have already gained extensive experience working in this field (Bulgarian, Croatian RC) and others are beginning to develop new activities (Romanian RC, RC of Serbia & Montenegro).

The RD will focus on raising awareness of the issue with NS not currently involved in working with this target group, and where interest is shown will support NS in planning activities, and in accessing funding. The potential for experience exchange in the region is high. Again, additional resources to support project developments here

will be mobilized through the regional roster concept. Roma communities, poor rural families, families with many children, unemployed, due to the poor socio economic situation in some countries, unfortunately are at greater possible risk. The RD will provide assistance to NSs to provide accurate information and raise public awareness of trafficking in human beings in their countries.

In promoting humanitarian values the RD will be looking at challenging behavior both within the RC and in communities, to break discriminatory practices and to ensure that the work of the RC in the region is open to, and embraces all communities and groups in any given country.

### **Overall Goal**

The human dignity of vulnerable communities and individuals in Central Europe is protected and respected

### **Objective**

Protection of, and respect for, the dignity of vulnerable and affected groups is embedded in all NS programmes [<click here for HV project logframe>](#)

### **Expected Results**

1. NSs are recognized and respected as dialogue partners on national and regional vulnerability issues.
2. RD has supported NSs position themselves in response to human trafficking
3. NS are implementing anti-stigma and discrimination campaigns to support those living with HIV/AIDS and TB.
4. NS's programmes are planned and implemented with a community based approach to PHV.
5. Two editions of the Bridge magazine are launched each year.

## **Coordination, Management, Cooperation and Strategic Partnerships 2007**

At the heart of the RD's vision for coordination, cooperation and partnership development over the next two years are two related concepts: those of the regional roster and regional resource centre. The RD in Budapest has been developing over the last few years a unique human resource set up, based on the principles of the regional recruitment programme. From an essentially delegate-heavy delegation in the mid 1990s the Budapest office is now staffed principally by persons recruited from NSs of the region. To further increase the Federation's capacity to support NSs in the region, and to meet the expressed needs, even greater use of regional resources is envisaged. A Regional Resource Roster exists and will be further developed. In addition to those persons already identified or who have been deployed in the past, NSs have been requested to provide further input to develop it. The roster is focusing on practitioners in key areas: people who have the experience and have been practically involved in implementing ideas in their area of expertise. Opportunities for personal and professional development will be provided for these practitioners to ensure up-to-date knowledge on Movement issues, and that professional and technical standards are maintained. The RD already has the models for deployment to ensure that specific expertise can be easily accessible to the NSs in the region. This draws on the procedures of the Regional Disaster Response Team (RDRT).

Due to the decentralization process in the Secretariat and the fact that the final decision about future Federation structure in the Europe have not been made yet, RD continues to have long-lasting temporary arrangements when it comes to Head of Delegation and Programme Coordinator positions. Currently, the Federation Representative in Bosnia and Herzegovina is Acting Head of Regional Delegation managing whole regional team including Federation delegations/offices within the region (Serbia, Kosovo, Bosnia and Herzegovina) focusing at the same time on the relationship with the NSs leadership. In the RD Budapest office, the Regional Organizational Development Coordinator is Acting Head of Budapest Office managing the daily basis Federation team. The Finnish RC continues supporting the position of a Finance Admin Delegate in order to provide expertise in financial, admin and HR related issues.

Achievements to date will be followed up in 2007, looking in particular at how global agreements signed between the Federation and individual partners can best be adapted and implemented in the region. As part of the membership services to be offered to NSs is support to increase their active participation in Federation governing bodies, principally through ensuring information sharing and enabling forums for the discussion of key Federation

governance-led processes. At the key statutory conference meeting for Europe, the RD will play a role in preparing for, participating at and following up on decisions from the Istanbul Conference to be held in May 20-24 2007. Opportunities will also be created for appropriate regional meetings for NS leadership – to discuss key governance and management issues, planning and funding in the region, and to promote learning opportunities.

### **Overall Goal**

Individuals and communities mobilized to reduce vulnerability and to improve the quality of life for all.

### **Objective**

Effective and efficient resource mobilization and management in the region for maximum benefit to vulnerable communities and individuals

### **Expected Results**

1. NS are receiving the requested expertise through experienced practitioners in a timely manner.
2. Movement cooperation between NS inside and outside the region is based on mutual understanding, agreement and respect for working culture.
3. Strategic partnerships with government, authorities, UN agencies, international organizations provide a basis for more effective resource management and mobilization and benefit NS programmes.
4. NS in the region are actively participating in Federation governing bodies.

*The programmes herein are aligned with the Federation's Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity."*

1. *Reduce the numbers of deaths, injuries and impact from disasters.*
2. *Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.*
3. *Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.*
4. *Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.*

*For further information specifically related to this operation please contact:*

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*All International Federation assistance seeks to adhere to the [Code of Conduct](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response](#) in delivering quality and accountable assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation's website at <http://www.ifrc.org>*

**[Revised budget attached below; click here to return to the title page and contact information.](#)**

# BUDGET 2006

## PROGRAMME BUDGETS SUMMARY

Appeal no.: AA66001 - 2006

Name: CENTRAL EUROPE - BUDAPEST - 2006

PROGRAMME:

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter	0	0	0	0	0	0	0
Construction	0	0	0	0	0	0	0
Clothing & Textiles	0	0	0	0	0	0	0
Food	0	0	0	0	0	0	0
Seeds & Plants	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	0	0	0	0
Medical & First Aid	0	0	0	0	0	0	0
Teaching Materials	0	0	0	6,500	0	0	6,500
Utensils & tools	0	0	0	0	0	0	0
Other Supplies & Services	0	0	0	596,389	0	0	596,388
<b>SUPPLIES</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>602,889</b>	<b>0</b>	<b>0</b>	<b>602,888</b>
Land & Buildings	0	0	0	0	0	0	0
Vehicles	0	0	0	0	0	0	0
Computers & Telecom	0	16,500	0	3,960	0	0	20,460
Medical equipment	0	0	0	0	0	0	0
Other Equipment	0	0	0	0	0	0	0
<b>LAND, VEHICLES &amp; EQUIPMEN</b>	<b>0</b>	<b>16,500</b>	<b>0</b>	<b>3,960</b>	<b>0</b>	<b>0</b>	<b>20,460</b>
Storage	0	0	0	0	0	0	0
Distribution & Monitoring	0	0	0	0	0	0	0
Transport & Vehicles cost	0	24,290	0	4,260	1,965	0	30,515
<b>TRANSPORT &amp; STORAGE</b>	<b>0</b>	<b>24,290</b>	<b>0</b>	<b>4,260</b>	<b>1,965</b>	<b>0</b>	<b>30,515</b>
International Staff	0	0	0	17,520	114,779	0	132,298
Regionally Deployed Staff	52,200	67,800	0	114,342	0	0	234,341
National staff	12,000	74,000	0	19,492	0	0	105,492
National Society Staff	0	0	0	99,923	0	0	99,922
Consultants	0	0	41,500	10,000	0	0	51,500
<b>PERSONNEL</b>	<b>64,200</b>	<b>141,800</b>	<b>41,500</b>	<b>261,277</b>	<b>114,779</b>	<b>0</b>	<b>623,555</b>
Workshops & Training	102,400	261,525	0	273,668	14,828	0	652,420
<b>WORKSHOPS &amp; TRAINING</b>	<b>102,400</b>	<b>261,525</b>	<b>0</b>	<b>273,668</b>	<b>14,828</b>	<b>0</b>	<b>652,420</b>
Travel & related expenses	22,500	13,000	11,250	68,772	0	0	115,522
Information & Public Rela	31,450	0	43,100	91,641	0	0	166,190
Office Running Costs	0	18,000	0	10,326	0	0	28,325
Communication Costs	7,500	27,880	0	31,412	5,800	0	72,592
Professional Fees	0	0	0	5,527	0	0	5,526
Other General Expenses	4,800	4,000	0	8,901	0	0	17,701
<b>GENERAL EXPENDITURE</b>	<b>66,250</b>	<b>62,880</b>	<b>54,350</b>	<b>216,579</b>	<b>5,800</b>	<b>0</b>	<b>405,858</b>
Asset Depreciation	0	0	0	0	0	0	0
<b>DEPRECIATION</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Contributions & Transfers	0	0	0	0	0	0	0
<b>CONTRIBUTIONS &amp; TRANSFERS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Programme Support	16,187	35,246	6,663	94,728	9,550	0	162,374
<b>PROGRAMME SUPPORT</b>	<b>16,187</b>	<b>35,246</b>	<b>6,663</b>	<b>94,728</b>	<b>9,550</b>	<b>0</b>	<b>162,374</b>
<b>TOTAL BUDGET:</b>	<b>249,037</b>	<b>542,241</b>	<b>102,513</b>	<b>1,457,361</b>	<b>146,922</b>	<b>0</b>	<b>2,498,073</b>

# BUDGET 2007

## PROGRAMME BUDGETS SUMMARY

Appeal no.: AA66001 - 2007

Name: CENTRAL EUROPE - BUDAPEST - 2007

PROGRAMME:

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter	0	0	0	0	0	0	0
Construction	0	0	0	0	0	0	0
Clothing & Textiles	0	0	0	0	0	0	0
Food	0	0	0	0	0	0	0
Seeds & Plants	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	0	0	0	0
Medical & First Aid	0	0	0	0	0	0	0
Teaching Materials	0	0	0	0	0	0	0
Utensils & tools	0	0	0	0	0	0	0
Other Supplies & Services	0	0	0	314,200	0	0	314,200
<b>SUPPLIES</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>314,200</b>	<b>0</b>	<b>0</b>	<b>314,200</b>
Land & Buildings	0	0	0	0	0	0	0
Vehicles	0	0	0	0	0	0	0
Computers & Telecom	0	15,000	0	1,450	0	0	16,450
Medical equipment	0	0	0	0	0	0	0
Other Equipment	0	0	0	0	0	0	0
<b>LAND, VEHICLES &amp; EQUIPMEN</b>	<b>0</b>	<b>15,000</b>	<b>0</b>	<b>1,450</b>	<b>0</b>	<b>0</b>	<b>16,450</b>
Storage	0	0	0	0	0	0	0
Distribution & Monitoring	0	0	0	0	0	0	0
Transport & Vehicles cost	2,400	18,600	0	5,150	0	0	26,150
<b>TRANSPORT &amp; STORAGE</b>	<b>2,400</b>	<b>18,600</b>	<b>0</b>	<b>5,150</b>	<b>0</b>	<b>0</b>	<b>26,150</b>
International Staff	0	0	0	8,400	114,720	0	123,120
Regionally Deployed Staff	42,000	58,200	0	81,300	0	0	181,500
National staff	7,500	43,500	0	14,700	0	0	65,700
National Society Staff	0	0	0	20,000	0	0	20,000
Consultants	0	0	47,500	21,900	0	0	69,400
<b>PERSONNEL</b>	<b>49,500</b>	<b>101,700</b>	<b>47,500</b>	<b>146,300</b>	<b>114,720</b>	<b>0</b>	<b>459,720</b>
Workshops & Training	203,000	208,180	9,000	157,550	0	0	577,730
<b>WORKSHOPS &amp; TRAINING</b>	<b>203,000</b>	<b>208,180</b>	<b>9,000</b>	<b>157,550</b>	<b>0</b>	<b>0</b>	<b>577,730</b>
Travel & related expenses	19,000	14,000	11,250	33,000	0	0	77,250
Information & Public Rela	34,000	0	43,548	7,000	0	0	84,548
Office Running Costs	0	15,000	0	12,000	0	0	27,000
Communication Costs	7,800	23,160	0	21,000	0	0	51,960
Professional Fees	0	0	0	0	0	0	0
Other General Expenses	2,000	3,600	0	4,920	0	0	10,520
<b>GENERAL EXPENDITURE</b>	<b>62,800</b>	<b>55,760</b>	<b>54,798</b>	<b>77,920</b>	<b>0</b>	<b>0</b>	<b>251,278</b>
Asset Depreciation	0	0	0	0	0	0	0
<b>DEPRECIATION</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Contributions & Transfers	0	0	0	0	0	0	0
<b>CONTRIBUTIONS &amp; TRANSFERS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Programme Support	22,086	27,755	7,737	48,842	7,975	0	114,395
<b>PROGRAMME SUPPORT</b>	<b>22,086</b>	<b>27,755</b>	<b>7,737</b>	<b>48,842</b>	<b>7,975</b>	<b>0</b>	<b>114,395</b>
<b>TOTAL BUDGET:</b>	<b>339,786</b>	<b>426,995</b>	<b>119,035</b>	<b>751,412</b>	<b>122,695</b>	<b>0</b>	<b>1,759,923</b>